

Governor's Commission for a Drug Free Indiana

A Division of the



Comprehensive Community Plan

County: Sullivan

LCC: Partners for Drug Free Sullivan County

Date: 2/21/06



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Plan Summary

Mission Statement: The mission of the Sullivan County Partners for a Drug Free Sullivan County shall be to reduce the incidence of substance abuse in Sullivan County through education, treatment, prevention, and coordination with other agencies.

History: The Sullivan County Local Coordinating Council (LCC) was formed in early 1990 and has continued to meet on a regular basis on the third Thursday for nine months of the year. The original composition of the Sullivan LCC membership represented mental health, school officials, law enforcement, and concerned parents. While members have come and over the years, the current core still represents the areas initially involved. From the many needs found prevalent in Sullivan County, the primary focus has been on providing education/prevention services to youth of the county.

Located in picturesque West Central Indiana along the banks of the Wabash River, Sullivan County is rural in nature with its economy based primarily in agriculture and coal mining. The demographics of the county show a higher than average proportion of older residents in the county, largely due to younger residents leaving due to less favorable employment opportunities. The lack of entertainment and community activities has long been recognized as both a liability in keeping younger residents in the county, and more seriously, as a major factor in contributing to many of the ATOD issues facing children, teens and young adults throughout the county.

The Sullivan LCC has actively supported activities directed at the youth of Sullivan County through funding and direct involvement. Funds have been provided to schools in both school districts, the Southwest School Corporation and the Northeast School Corporation. Funding has provided materials to educate the students on the hazards and consequences of the ATOD use. These materials have consisted of books, videos, conferences, and guest speakers. Additionally, activities such as youth dances have been held throughout the years in an effort to provide positive youth-oriented activities as an alternate to ATOD use.

Treatment for ATOD misuse and addiction is a problem in Sullivan County, much like it is in every other rural county in Indiana. In-patient services are very limited and while counseling services are available, the economic status of those needing such services may prevent them from seeking services. Hamilton Center, Inc., has provided treatment programs in the past at the Sullivan County Jail in an attempt to educate and change behaviors in an effort to help inmates develop appropriate coping skills and remain chemical free upon their release. Unfortunately, in most instances the environment that those inmates return to sees them slip back into ATOD misuse and addiction.

Law enforcement in Sullivan County has been stretched to the maximum in funding and resources. Doing more with less is a common theme, even with law enforcement agencies

working on a united front. The epidemic of methamphetamine is the number one drug problem in Sullivan County. Sullivan County sits between Vigo County to the north and Knox County to the south. Over the past three years, Vigo and Knox Counties have ranked one and two respectively, in the number of clandestine methamphetamine laboratories seized by law enforcement officials. By virtue of being located between these two "hotbeds of methamphetamine activities," Sullivan County is being overrun with the problems associated with this potent illicit drug.

Alcohol misuse and addiction rank second to methamphetamine in Sullivan County. Some of the contributing factors associated with drug and alcohol use include the lack of entertainment and other activities for the youth of Sullivan County. Free time among the youth is commonly spent drinking and/or using illicit drugs. Additionally, the slow economy and high unemployment among adults often contributes to the use of alcohol and illicit drugs. Finally, public acceptance of alcohol use has led to apathy and a feeling that if someone is using alcohol it is "better" than using methamphetamine.

Summary of the Comprehensive Community Plan: Two major problems faced the Sullivan County LCC during the time period covered in the Plan Update. Sullivan County ranks-----in Indiana for the number of clandestine methamphetamine laboratories seized from 1999 through 2005. The production, distribution and use of methamphetamine in Sullivan County have impacted the entire county. The resources of law enforcement, judicial system, social services, and treatment have been stretched beyond current funding and personnel levels. While the methamphetamine problem as a whole is devastating to the entire community, one area is of particular concern, that of the impact on the children of Sullivan County. Children can and are being exposed to methamphetamine laboratories, the precursors required for the production of methamphetamine, and the adult (often a parent/caregiver) under the influence of methamphetamine. The exposure creates significant health and safety concern for such children. The Sullivan County Division of Family and Children Services (DCS) has experienced a significant increase in the number of cases involving children and their exposure to methamphetamine and parents/caregivers under the influence of methamphetamine. This exposure often results in the immediate removal of children from their homes and placed in temporary housing, often foster care.

The second problem involves the difficulty recruiting new members to the LCC. Many efforts have been made, and the LCC will continue to recruit new members within Sullivan County.

[illegible]

Problem Identification

Problem Statement #1: Among Sullivan County residents seeking treatment for substance abuse issues, the number of those financially disadvantaged is disproportionately higher than those not identified as financially disadvantaged (below the 200% of the poverty level).

Supportive Data:

Income and Poverty Data for Sullivan County

	<u>Number</u>	<u>Rank in State</u>
Per Capita Personal Income (annual) in 2001	\$20,417	84
Median Household Income in 2000	\$32,976	89
Poverty Rate in 2000	10.9%	21
Children in 2000	13.4%	20
Welfare Monthly avg (TANF) Families in 2002	129	43
Food stamp Recipients in 2002	1,829	40
Free and Reduced Fee Lunch Recipients in 2003	1,279	60

Source: 2000 U.S. Census Bureau of Economic Analysis; US Census Bureau; Indiana Family Social Services Administration; Indiana Department of Education.

Labor Force for Sullivan County in 2002

	<u>Number</u>	<u>Rank in State</u>
Total Resident Labor Force	9,320	74
Employed	8,805	75
Unemployed	515	73
Unemployment Rate	5.5% (5.1%)	39
December 2003 Unemployment Rate	6.5% (4.9%)	16

Source: Indiana Department of Workforce Development.
Data in parenthesis represents Indiana unemployment rate.

Free or reduced price lunches for Sullivan County Students

	<u>Enrollment 2003</u>	<u>Free Lunches</u>	<u>Reduced Price</u>
All Sullivan County Schools	3,452	966 (28%)	380 (11%)
Source: Indiana Department of Education			

Year 1 Update:

- Hoosier Assurance Plan (HAP)

	<u>FY 2002-2003*</u>	<u>FY 2003-2004*</u>
Sullivan Co	336	404
Residents Eligible For HAP		
Total Funded	145	195
Total not funded	191	209

- Hamilton Center serves as the primary source of behavioral health services in Sullivan County. The numbers listed are the total number of Sullivan County residents served by Hamilton Center in Sullivan County.

	<u>FY 2002-2003*</u>		<u>FY 2003-2004*</u>	
	<u>Total Residents Served</u>	<u>Under 200% of Poverty</u>	<u>Total Residents Served</u>	<u>Under 200% of Poverty</u>
0-17 years of age	318	266	283	222
18-64 years of age	579	393	595	445
65 + Years of age	16	6	16	7
Unavailable	3	3	0	0
Total	916	668	894	674
		73%		75%

- **49 female and 71 males received treatment services for alcohol or drug related issues in 2002.**
- **Total percent of individuals not served having incomes below 200% of the Federal Poverty Level and eligible for HAP support: 48%**

Year 2 Update:

- Hoosier Assurance Plan (HAP) FY 2004-2005

Sullivan Co. Residents Eligible for HAP	431
Total Funded	165

Total not funded Percentage not funded – 46.4%	266
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- Hamilton Center serves as the primary source of behavioral health services in Sullivan County. The numbers listed are the total number of Sullivan County residents served by Hamilton Center in Sullivan County.

		<u>(HAP) FY 2002-2003*</u>		<u>FY 2003-2004*</u>		<u>FY 2004-2005</u>	
Total Residents Served	Under 200% of Poverty	Total Residents Served	Under 200% of Poverty	Total Residents Served	Under 200% of Poverty		
0-17 years of age		318	266	283	222	287	243
18-64 years of age		579	393	595	445	514	396
65 + Years of age		16	6	16	7	9	6
Unavailable		3	3	0	0	0	0
Total		916	668	894	674	810	64
73%		75%		80%			

- 26 female, 43 males received treatment services for alcohol or drug related issues in 2003.**
- Total percent of individuals not served having incomes at or below 200% of the Federal Poverty Level and eligible for HAP support: 48.7**

Objectives:

- The LCC will provide funding to support substance abuse treatment services in Sullivan County, offered at Hamilton Center, Inc (HCI). HCI will continue use of the sliding fee scale for the financially disadvantaged.
- The LCC with support educational programming for adults and youth in Sullivan County.
- Indigent support services will be identified and supported by the LCC as they relate to ATOD issues.

Year 1 Update:

- An Intensive Outpatient Program (IOP) was implemented at Hamilton Center in Sullivan County (HCI). Most insurance companies and Medicaid covered the program cost, which increased community access to treatment.
- Head Start is no longer active in Sullivan County due to a reduction in funding by the state.
- HCI is currently in 4 of 7 elementary schools, the two junior high schools, and one of the two high schools.

Year 2 Update:

- The LCC identified the need offer counseling support to NWSC Junior High Students with ATOD issues. However, the support was not forthcoming from the NWSC and the emphasis of this program changed.
- An education/prevention program was provided for the NWSC JHS which served during the 04-05 school year, and is projected to serve students during the 05-06 school year.
- The LCC sponsored a booth at the second annual Kid's Fair, a community wide event, passing out materials on ATOD. Approximately 2,400 children and their families attended the Kid's Fair.
- Currently in Sullivan County indigent support services are not being utilized by treatment providers.

Final Update:

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Goal:

- There will be an increase in the number of individuals receiving treatment services who are identified as lacking adequate insurance or in need of financial support.

Year 1 Annual Benchmarks:

- The number of individuals receiving services for drug or alcohol related issues by the Hamilton Center decreased by 69 between 2002 and 2003.
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Year 2 Annual Benchmarks:

- The percentage of individuals eligible for HAP funding receiving services decreased by 2.3% in 2005.
- 48.7% of individuals eligible for HAP services did not receiving services in 2004 versus 46.3% of individuals in 2005.
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Problem Statement #2: Drivers impaired by substances other than alcohol are less likely to be detected by law enforcement officers in Sullivan County due to a lack of training as drug recognition experts.

Supportive Data:

Problem #2 has been eliminated from the CCP by the LCC.

Problem Statement #3: The use of alcohol, tobacco and other drugs among elementary, junior high and high school students in Sullivan County exceeds national and state norms.

Supportive Data:

- Data provided from the 2003 Alcohol, Tobacco and Other Drug Use by Indiana Children and Adolescents, as compiled by the Indiana Prevention Resource Center at Indiana University, indicate the usage rates among 6th, 8th, 10th and 12th grade students in Sullivan exceed based on information provided by students in response to questions.

Based on enrollment information from the Indiana Department of Education for Sullivan Count for the 2002-2003 school year, enrollment for the previously mentioned grades was as follows:

6 th Grade	275
8 th Grade	277

10th Grade 188
12th Grade 274

Cigarettes - Daily Use (data reported as percentages)

	<u>1993</u>	<u>1994</u>	<u>1998</u>	<u>2000</u>	<u>2003</u>	<u>Regional</u>	<u>Indiana</u>	<u>National</u>
6 th Grade	4.8	13.3	4.2	4.0	1.7	1.5	2.2	----
8 th Grade	4.3	12.2	6.7	8.9	10.0	5.7	3.7	5.1
10 th Grade	16.7	35.4	34.2	23.4	36.2	13.1	13.7	10.1
12 th Grade	41.7	37.6	31.6	31.3	32.4	17.3	35.3	16.7

Cigarettes- Monthly Use

	<u>1993</u>	<u>1994</u>	<u>1998</u>	<u>2000</u>	<u>2003</u>	<u>Regional</u>	<u>Indiana</u>	<u>National</u>
6 th Grade	23.8	22.5	16.7	8.1	2.6	3.8	5.1	----
8 th Grade	13.0	40.0	27.9	33.7	29.0	11.5	14.0	10.7
10 th Grade	40.0	51.0	46.8	40.4	46.8	22.4	22.2	17.7
12 th Grade	45.8	52.9	50.0	43.7	41.2	26.8	28.8	26.7

Alcohol – Daily Use

	<u>1993</u>	<u>1994</u>	<u>1998</u>	<u>2000</u>	<u>2003</u>	<u>Regional</u>	<u>Indiana</u>	<u>National</u>
6 th Grade	0.0	0.0	0.0	1.0	0.0	6.6	0.6	----
8 th Grade	0.0	2.6	1.9	5.0	4.0	1.5	2.0	0.7
10 th Grade	3.3	7.3	12.6	5.3	6.4	4.0	4.0	1.8
12 th Grade	8.3	7.1	13.8	7.0	3.9	5.9	6.0	3.5

Alcohol – Monthly Use

	<u>1993</u>	<u>1994</u>	<u>1998</u>	<u>2000</u>	<u>2003</u>	<u>Regional</u>	<u>Indiana</u>	<u>National</u>
6 th Grade	33.3	23.3	13.5	9.1	12.8	6.6	9.9	----
8 th Grade	30.4	41.7	36.5	39.6	35.0	19.9	24.3	19.3
10 th Grade	50.0	51.0	48.6	45.7	50.0	34.1	36.9	35.4
12 th Grade	41.7	42.4	56.3	35.2	25.4	41.0	29.3	23.6

Alcohol – Binge Drinking

	<u>1993</u>	<u>1994</u>	<u>1998</u>	<u>2000</u>	<u>2003</u>	<u>Regional</u>	<u>Indiana</u>	<u>National</u>
6 th Grade	15.0	15.0	10.4	13.1	4.3	4.0	5.3	----
8 th Grade	0.0	0.9	1.0	3.0	5.0	11.6	2.6	1.2
10 th Grade	3.3	8.3	15.3	4.3	9.6	19.7	5.6	3.9
12 th Grade	0.0	7.1	10.0	4.2	5.9	25.6	7.4	6.0

Marijuana – Daily Use

	<u>1993</u>	<u>1994</u>	<u>1998</u>	<u>2000</u>	<u>2003</u>	<u>Regional</u>	<u>Indiana</u>	<u>National</u>
6 th Grade	0.0	0.8	0.0	0.0	1.7	0.0	0.5	----
8 th Grade	0.0	0.9	1.0	3.0	5.0	1.7	2.6	1.2
10 th Grade	3.3	8.3	15.3	4.3	9.6	3.8	5.6	3.9
12 th Grade	0.0	7.1	10.0	4.2	5.9	6.3	7.4	6.0

Marijuana – Monthly Use

	<u>1993</u>	<u>1994</u>	<u>1998</u>	<u>2000</u>	<u>2003</u>	<u>Regional</u>	<u>Indiana</u>	<u>National</u>
6 th Grade	0.0	2.5	2.1	2.0	1.7	1.0	2.3	----
8 th Grade	0.0	4.3	11.5	14.9	19.0	7.0	10.6	8.3
10 th Grade	6.7	16.7	27.9	7.4	28.7	14.2	18.2	17.8
12 th Grade	21.7	9.4	31.3	18.3	19.6	16.3	19.8	21.5

The following data on Juveniles and the Law from the Indiana Youth Institute's *Kids Count in Indiana*, 2003 edition:

	<u>1990</u>	<u>2001</u>
Number of Juveniles committed to the Department of Corrections	1	2
Number of Status Case Filings	0	23
Number of Juvenile Delinquency case filings	31	102

Objectives:

- Reduce the usage of alcohol, tobacco and other drugs among Sullivan County students, as evidenced by the Alcohol, Tobacco and Other Drug Use by Indiana Students and adolescents performed by the Indiana Prevention Resource Center at Indiana University.
- Support the distribution of information to parents and the general public curricula in all Sullivan County schools.

Year 1 Update:

The following data from the Sullivan County Probation Department:

2005:

- **136** juveniles before the court. Of those, **60** were for drug/alcohol issues (**44%**). Of the **60**:
- **7** were for operating while intoxicated or under a controlled substance.
- **13** were for possession of a controlled substance or marijuana.
- **34** were for minor consumption.
- BAC levels, in connection with alcohol related fatalities in Indiana, increased significantly between 2004 and 2005: BAC .01 up 5.3%. BAC .08 up 6.2% and BAC .15 up 3.4%.
- National BAC rates increased as follows between 2004 and 2005: BAC .01 decreased 0.2%. BAC .08 decreased .04% and BAC .15 increased 0.2%.
- Additional data: 6 youth between the ages 0-17 referred for substance abuse treatment in 2002.
- No IPRC Survey Data available

Year 2 Update:

2006: (as of 9/27/06)

- 121** total juveniles before the court. Of those, **54** were for drug/alcohol issues (**45%**). Of the 54:
- **2** were for operating while intoxicated or under a controlled substance.
 - **11** were for possession of a controlled substance or marijuana.
 - **39** were for minor consumption.
 - **Other**= PI, possession of paraphernalia.
 - According to the Sullivan County Probation department, there has been a rise this year of possession of Legend Drugs (prescription but not a controlled substance). Most of the positive drug screens are for Meth and THC, and they are seeing/hearing about THC being sold that is laced with cocaine.
 - Additional data: 6 youth between the ages 0-17 referred for substance abuse treatment in 2003.

Final Update:

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- The LCC will utilize Dale Phillips, National Drug Abuse Awareness Coordinator for the Elks, to provide brochures and information on ATOD throughout Sullivan County.

Year 1 Update:

- Supported various activities for Sullivan County students which addressed substance abuse prevention. Activities included, attendance at student oriented substance conferences and training sessions and student oriented organizations such as S.A.D.D.
- Supported the adoption and implementation of evidence-based substance abuse prevention curricula in all Sullivan County school systems.
- Supported programs that focused on substance abuse/prevention.
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Year 2 Update:

- 182 JHS students in the NESC participated in educational/prevention program supported by the LCC. Program offered as a module during health classes for 7th and 8th graders.
- LCC supported Youth to Youth and S.A.D.D. for Sullivan County High School student.
- Red Ribbon week supported by the LCC in all JR/SR High Schools in Sullivan County.
- LCC supported the purchase of substance abuse videos and books that were utilized at Sullivan High School's Consumer and Family Education classes.
- Dale Phillips, National Drug Abuse Awareness Coordinator for the Elks, presented at a majority of community events in Sullivan County.
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Final Update:

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Goals:

1. Decrease the use of alcohol, tobacco and drugs among Sullivan County Students.
2. Decrease the number of youth arrested and charged with Alcohol and Drug related offenses.
3. Information and support addressing drug abuse will be provided for the local school corporation through a minimum of three awareness related activities.

Year 1 Annual Benchmarks:

Minor consumption and arrest records not available from 2003.

Year 2 Annual Benchmarks:

- There has been an increase in minor consumption arrests over the last year. Although the data is not yet complete for the 2006 year, we are only 2 under the total number of arrests for controlled substances/marijuana for 2005 (September, 2006).
- There are varying changes of reported daily and monthly cigarette use from 2003 Sullivan County 6th, 8th, 10th, and 12th graders as compared to those grades among the entire 2006 Regional West. For instance, a *higher* percentage of 2003 Sullivan County students (6th, 8th, 10th, and 12th graders) smoked cigarettes on a daily basis than the percentage of 2006 Regional West students. Furthermore, a *higher* percentage of 2003 Sullivan County 8th, 10th, and 12th graders smoked cigarettes on a monthly basis than the percentage of those grades among the 2006 Regional West. At the same time, a *lower* percentage of 2003 Sullivan County 6th graders smoked cigarettes on a monthly basis than the percentage of 2006 Regional West 6th graders.
- There are varying changes of reported daily and monthly alcohol use and binge-drinking from 2003 Sullivan County 6th, 8th, 10th, and 12th graders as compared to those grades among the entire 2006 Regional West. For instance, a *lower* percentage of 2003 Sullivan County 6th and 12th graders drank alcohol on a daily basis than the percentage of 2006 Regional West 6th and 12th graders. However, a *higher* percentage of 2003 Sullivan County 8th and 10th graders drank alcohol on a daily basis than the percentage of 2006 Regional West 8th and 10th graders. Moreover, a *higher* percentage of 2003 Sullivan County 6th, 8th, and 10th graders drank alcohol on a monthly basis than the percentage of 2006 Regional West 6th, 8th, and 10th graders. Conversely, a *lower* percentage of 2003 Sullivan County 12th graders drank alcohol on a monthly basis than the percentage of 2006 Regional West 12th graders. Finally, a *lower* percentage of 2003 Sullivan County 8th, 10th, and 12th graders participated in binge-drinking alcohol than the percentage of 2006 Regional West 8th, 10th, and 12th graders. On the other hand, a *higher* percentage of 2003 Sullivan County 6th graders participated in binge-drinking alcohol than the percentage of 2006 Regional West 6th graders.
- There are varying changes of reported daily and monthly marijuana use from 2003 Sullivan County 6th, 8th, 10th, and 12th graders as compared to those grades among the entire 2006 Regional West. For instance, a *higher* percentage of 2003 Sullivan County 6th, 8th, and 10th graders smoked marijuana on a daily basis than the percentage of 2006 Regional West 6th, 8th, and 10th graders. In contrast, a *lower* percentage of 2003 Sullivan County 12th graders smoked marijuana on a daily basis than the percentage of 2006 Regional West 12th graders. Additionally, a *higher* percentage of 2003 Sullivan County 6th, 8th, 10th, and 12th graders smoked marijuana on a monthly basis than the percentage of 2006 Regional West students in those grades.

Final Report:

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Problem Statement #4: Due to lack of a diversified representation among the members of the Sullivan County Local Coordinating Council (LCC), the organization lacks a comprehensive approach in dealing with ATOD issues in Sullivan County.

Supportive Data:

Problem statement #4 eliminated by the LCC

Year 1 Update:

- Will continue to work on membership, however, LCC recognizes this issue is more of a need rather than a problem.

Problem Statement #5: With the increase in the number of methamphetamine incidents in Sullivan County from 1998-present, the children who live at or visit the sites of methamphetamine laboratories or are present during the production of methamphetamine face acute health and safety risks, including physical, emotional and sexual abuse and medical neglect.

Supportive Data:

- Indiana State Methamphetamine Report 2004, Sullivan County experienced its first seized clandestine methamphetamine laboratory in 1998. Mirroring other counties in the region, Sullivan County also saw a substantial increase in the number of clandestine methamphetamine laboratories seized.

<u>1999</u>	<u>2000</u>	<u>2001</u>	<u>2002</u>	<u>2003</u>
2	11	26	59	53

- In 1999, Sullivan County ranked 16th in Indiana in the number of clandestine methamphetamine laboratories seized with two. In subsequent years, Sullivan County ranked in the top ten at 7th in 2000, 8th in 2001, 4th in 2002, and 6th in 2003. From 1992 through 2003, Sullivan County ranks 5th in Indiana in the

number of clandestine methamphetamine laboratories seized and from 1999 through 2003 Sullivan County ranks 6th.

- From December 2001 to December 2002, the Sullivan County Office of Family and Children (SCDCS) had a caseload of 56 children. Of those, 48 were families in which methamphetamine was being used.

Year 1 Update:

- In 2005, the SCDCS received 408 reports of alleged abuse and neglect in 2005. Of the 408 reports received 207 were investigated and approximately 1/3 of those reports involved drugs.
- 37 children were removed from their homes in 2005 for methamphetamine related conditions.
- In 2004, ISP identified 30 meth labs, other law enforcement agencies identified 31 for a total of 61 meth labs in Sullivan County.
- In 2005, ISP identified 14 meth labs, other law enforcement agencies identified 0 for a total of 14 meth labs in Sullivan County.
- The rate of treatment admissions reporting meth use in Indiana increased from 4.0% to 9.2% between 2000 and 2004 (SAMHSA Treatment Episode Data System)

Year 2 Update:

- There is currently up and running protocol in Sullivan County when children are found to be exposed to methamphetamine production, precursors and/or the final product.
- The majority of retailers in Sullivan County have been provided with education and materials pertaining to Meth Watch.
- 7% of Indiana youth in grades 9 through 12 reported having used methamphetamines one or more times during their lifetimes, compared to a national rate of 6.2% (2005 Youth Risk Behavioral Surveillance System)

Final Update:

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Objectives:

- Encourage the general public to utilize the TIP Line and report to law enforcement officials any suspected incidents involving methamphetamine labs, precursors, or the finished product.
- Support the development and implementation of protocols to be used by public health and medical professionals, law enforcement child protection workers, prosecutors and judges in Sullivan County related to children endangered through their exposure to methamphetamine labs, precursors, or the finished product.
- Support the training for public health, medical professionals, law enforcement, child protection workers, prosecutors and judges in Sullivan County on the hazards associated with methamphetamine laboratories and the precursors used to produce methamphetamine.
- Support legislation in the State of Indiana specific to the neglect of a child as it pertains to exposure to methamphetamine.
- Educate the general public of Sullivan County to the hazards faced by children exposed to the production, precursors and final production of methamphetamine.

Year 1 Update:

- Provided training to the majority of public health and medical professionals, law enforcement personnel, child protection workers, prosecutors and judges in Sullivan County on the hazards of methamphetamine production, precursors and/or the final product.
- Protocol was developed and implemented in Sullivan County for the collaboration and documentation of those incidents where children are exposed to methamphetamine production, precursors and/or the finished product.
- The LCC supported a state statute making it a criminal offense to expose children to methamphetamine production, precursors and/or the finished product.
- There was an increase in the number of incidents where children in Sullivan County were exposed to health and other hazards associated with the production of methamphetamine, precursors and/or the finished product.

- Supported the collection and analysis of data related to children exposed to the production, precursors and/or final production of methamphetamine. This data assisted in identifying trends related to this topic and assisted in the development and implementation of new strategies to address this issue in the future.

Goals:

- Decrease the number of methamphetamine related incidents in Sullivan County.
- Decrease the number of children affected by methamphetamine labs and other drug situations and subsequently removed from their homes.
- Decrease the number of Sullivan County youth reporting methamphetamine use.

Year 1 Annual Benchmarks:

- There has been an increase in the number of children impacted by methamphetamine in Sullivan County, but it has not been possible to determine actual numbers of children affected.
- Compare numbers of children taken from their homes. (2004 vs. 2005 or 2005 vs. 2006)

Year 2 Annual Benchmarks:

- Compare 2003 IPRC methamphetamine information for 6th, 10th and 12th graders with 2006 regional information.

Final Report:

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Sullivan County Drug Free Communities Fund Information

Amount collected 2004 in Sullivan County DFCF	\$13,735.50
Balance carried forward from 2003	<u>\$ 3,877.01</u>
Total Available DFCF for 2004	\$17,612.51

	<u>Budgeted</u>	<u>Spent</u>	<u>Balance</u>
Prevention and Education	\$8,806.26		
(\$4,403.13 25% minimum)			
North Central HS SADD chapter support S.A.D.D.		\$2,791.66	
Sullivan HS Consumer Family Education Substance abuse videos and books		\$1,966.66	
Union HS Health Class Substance abuse videos and books		<u>\$1,941.66</u>	
Registrations for Youth-to-Youth conference			
Prevention and Education TOTAL		\$6,699.98	\$ 1,806.28
Intervention and Treatment	\$4,403.13		
(\$4,403.13 25% minimum)			
Hamilton Center, Inc. Substance abuse treatment program For students at North Central HS		<u>\$3,050.00</u>	
Intervention and Treatment TOTAL		\$3,050.00	\$ 1,053.13

Criminal Justice	\$14,403.13		
(\$4,403.12 25% minimum)			
Sullivan County Sheriff Department		<u>\$1,450.00</u>	
Vet bills and food for drug K-9			
Criminal Justice TOTAL		\$1,450.00	\$ 2,653.13
Administrative costs		<u>\$ 900.00</u>	
GRAND TOTAL	\$17,612.52	\$12,099.98	\$ 5,512.54

Grant Process by the LCC of Sullivan County:

- Each member of the LCC must attend 7 out of the 9 monthly meetings annually in order to qualify for a proposal submission.
- Proposals are submitted in writing during the fall (October), and the spring (April).
*Please see attached Proposal Form
- In order for a proposal to be accepted, a member of the LCC must nominate a proposal and another member must then second the nomination. Following the nomination, the entire LCC votes on the said nomination.

Approved proposals:

See proposals listed under Sullivan County Drug Free Communities Fund Information.

Please attach the County's Fiscal Report for review!

Next Annual Update Due: May, 2007

Next Comprehensive Community Plan Due: May, 2008

Date of Community Consultant Review:

Disclaimer:

You agree that the information provided within this Plan is subject to the following Terms and Conditions. These Terms and Conditions may be modified at any time and from time to time; the date of the most recent changes or revisions will be established by the Commission and sent electronically to all Local Coordinating Councils.

Terms and Conditions:

The information and data provided is presented as factual and accurate. I hereby acknowledge that I can be asked to submit proper documentation regarding the data submitted within the Plan. Failure to do so could result in a "denied approval" by the Commission under IC 5-2-6-16.

The Local Drug Free Communities Fund must be spent according to the goals identified within the plan. I hereby acknowledge that I can be asked to submit proper documentation regarding funds that are collected, allocated, and disbursed within the county. Failure to do so could result in a "denied approval" by the Commission under IC 5-2-6-16.

Initials: